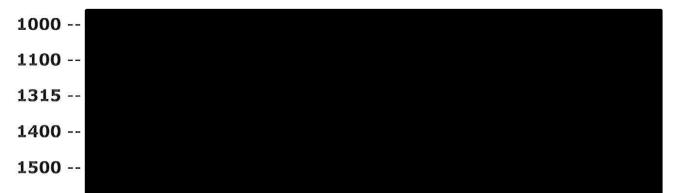
From: DonDragon <dondragon@aol.com>
To: DonDragon <DonDragon@aol.com>

Subject: MAP SCHEDULE

Date: Wed, Mar 21, 2012 7:13 am

WEDNESDAY



THURSDAY



10 names and addresses Ex. 6

Stom Stom de Blusio

		,	

I am the wowner tenant authorized represe at the following address [check one] and have aut	entative of the owner of the property (hereafter "property") thority to sign this agreement:
Address	
City / State / ZIP	
	ction Agency and Michigan Department of Environmental dother designated representatives to enter the property.
	ficers, employees, contractors and other designated conduct sampling and carry out other related response owing: Collect well water samples.
sampling activities. Upon request enough water of	arch 2012 and continue until EPA and MDEQ complete can be collected to be shared by resident / owner of the well. authority under Section 104(a) of the Comprehensive ility Act, 42 U.S.C. Section 9604(a).
This written permission is given by me voluntarily, on I knowledge of my right to refuse and without threats o	behalf of myself and all other co-owners of this property, with promises of any kind.
Check one: I grant access to my property (detail	ls below). I do <i>NOT</i> grant access to my property.
Printed Name / Middle Initial / Surname	Signature
Date Land phot	Cell phone
Title if signing as authorized representative of owner	E-mail
Address	City / State / ZIP
Do you want to be present during sampling? Yes [] No □
Property owner (if other than resident) Name	
	City / State ZIP
E-mail Land phone	Cell phone
Do you live at the property? Yes ☐ No ☐	If no: Is anyone living on the property: Yes ☐ No ☐
Name of person living on the property	Phone number(s)

U.S. Environmental Protection Agency collected water on your property in November 2011. Results of that sampling will be provided to you by an EPA agent.

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I am the \square owner \square tenant \square authorized represe at the following address (check anal and have au	entative of the owner of the property (hereafter "property") thority to sign this agreement:
Address CHAMPION	
City / State / ZIP	9,2
	ction Agency and Michigan Department of Environmental dother designated representatives to enter the property.
	fficers, employees, contractors and other designated conduct sampling and carry out other related response lowing: <i>Collect well water samples</i> .
sampling activities. Upon request enough water	larch 2012 and continue until EPA and MDEQ complete can be collected to be shared by resident / owner of the well. authority under Section 104(a) of the Comprehensive bility Act, 42 U.S.C. Section 9604(a).
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Check one: ☐ I grant access to my property (detail	ils below). ☐ I do NOT grant access to my property.
Printed Name / Middle initial / Surname	Signature
Date Land phone	Cell phone
Land priorie	ceii priorie
Title if signing as authorized representative of owner	E-mail
Address	City / State / ZIP
Do you want to be present during sampling? Yes [v No □
Property owner (if other than resident) Name_	
Address	City / State ZIP
E-mail Land phone	Cell phone
Do you live at the property? Yes ☐ No ☐	If no: Is anyone living on the property: Yes ☐ No ☐
Name of person living on the property	Phone number(s)

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I am the ☑ owner ☐ tenant ☐ author	orized representat	ive of the owner	of the property (here:	after "property")
at the following address leheck and	and have authori	ty to sign this agr	eement:	and property y
- Augress	N.			
Champion, MI 49814				
City / State / ZIP				
I grant authorization to U.S. Environme officers, employees, contractors and ot				nental Quality, their
This authorization allows EPA and the S representatives to have access to the p include, but not be limited to, the follows. This consent for access granted here will activities.	roperty to conduct s wing: collecting and	sampling and carry splitting well water	out other related respo r samples	onse activities to
I realize that these actions are taken as pa Environmental Response, Compensation			The state of the s	
This written permission is given by me v knowledge of my right to refuse and wi		THE CO. LEWIS CO., LANSING MICH.	ther co-owners of this	property with
Check one: ☐ I grant access to my pi	operty (details be	low)	o NOT grant access to	o my property
Printed Name / Wilddle Initial / Surname	Sig	nature		9
2-28-12	906-			
Date	Land phone		Cell phone(s)	
Title if signing as authorized representative	of owner E-m	nail		\(\frac{\partial}{\partial}\)
	Cł	nampion, MI 49814		rs
Address		// State / ZIP	=	£
Regularly drinking water from this well	"Regularly" means	more than twice a v	week]	
Number of adults [18 and older]	Number of	f children and ages		
Do you want to be present during samp	ing? Yes□ No□]		4 E
Property owner (if other than resident)	Name	8. _{1.}	**	a ar
Address	Citý	/ State / ZIP <u>Champi</u>	on, MI 49814	
E-mail	Land phone <u>906-</u>		Cell phone <u>906-</u>	e e
Do you live at the property? Yes \Box N	o 🗆	If no: Is anvo	one living on the prop	ertv: Yes □ No □
, and an an arrange prompt start, the same		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o tile biob	
Name of person living on the property		Phone number(s)	
			1 100	

3 names 1 address 2 phon no. Ex. 6

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Lam the Nowner 🗆 tenant 🗀 auth	arizad rangaantatiy	e of the owner of the property (hereafter "property")
at the following address school on	onzeu representativi	to sign this agreement:
	a nave additiontly	to sign this agreement.
Address		
Champion, MI 49814		
City / State / ZIP		*
	No. As softed and scales and	
officers, employees, contractors and o		y and Michigan Department of Environmental Quality, their sentatives to enter the property.
representatives to have access to the include, but not be limited to, the follow	property to conduct sar owing: collecting and sp	r officers, employees, contractors and their designated mpling and carry out other related response activities to plitting well water samples and continue until EPA and MDEQ complete sampling
		nd enforcement responsibilities under the Comprehensive ended, 42 U.S.C. '' 9601-9601-9675 (1997).
This written permission is given by me	voluntarily on behalf o	of myself and all other co-owners of this property with
knowledge of my right to refuse and w		
		<u>, </u>
Check one: \square I grant access to my $\mathfrak p$	property (details belo	□ I do NOT grant access to my property
Printed Ivame / Ivilddle Initial / Surname	Signa	ture
2-28-12	906-	
Date	Land phone	Cell phone(s)
Title if signing as authorized representative	e of owner E-mai	il
Address		mpion, MI 49814 State / ZIP
Regularly drinking water from this well	2000	09
Number of adults [18 and older]	Number of c	hildren and ages
Do you want to be present during sam	oling? Yes 🗆 No 🗆	
Property owner (if other than resident	t) Name	
Address	City /	State / ZIP Champion, MI 49814
-mail	_ Land phone 906-	Cell phone <u>906-</u>
Do you live at the property? Yes \Box N	10 □	If no: Is anyone living on the property: Yes \Box No \Box
Name of person living on the property		906-
Name of person living on the property		Phone number(s)

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I am the womer tenant authorized representative of the owner of the property (hereafter "property")
at the following address (check one) and have authority to sign this agreement:
Address
Champion, MI 49814
City / State / ZIP
I grant authorization to U.S. Environmental Protection Agency and Michigan Department of Environmental Quality, their officers, employees, contractors and other designated representatives to enter the property.
This authorization allows EPA and the State of Michigan, their officers, employees, contractors and their designated representatives to have access to the property to conduct sampling and carry out other related response activities to include, but not be limited to, the following: collecting and splitting well water samples This consent for access granted here will begin March 2012 and continue until EPA and MDEQ complete sampling activities.
I realize that these actions are taken as part of EPA's response and enforcement responsibilities under the Comprehensive Environmental Response, Compensation and Liability Act, as amended, 42 U.S.C. 11 9601-9601-9675 (1997).
This written permission is given by me voluntarily on behalf of myself and all other co-owners of this property with
knowledge of my right to refuse and without threats or promises of any kind.
Check one: ☐ I grant access to my property (details below) ☐ I do NOT grant access to my property
Printed Name / Ivilidale Initial / Surname Signature
2/28/12
Date Cell phone(s)
Title if signing as authorized representative of owner E-mail
Champion, MI 49814
Address City / State / ZIP
Regularly drinking water from this well ["Regularly" means more than twice a week]
Number of adults [18 and older] Number of children and ages
Property owner (if other than resident) Name
Property owner (if other than resident) Name
Address City / State / ZIP Champion, MI 49814
-mail Land phone <u>906-</u> Cell phone <u>906-</u>
Do you live at the property? Yes \square No \square If no: Is anyone living on the property: Yes \square No \square
906-
Name of person living on the property Phone number(s)

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Address CHAMPION	
City / State / ZIP	
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	icers, employees, contractors and other designated conduct sampling and carry out other related response owing: Collect well water samples.
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This written permission is given by me voluntarily, on b knowledge of my right to refuse and without threats or	ehalf of myself and all other co-owners of this property, with promises of any kind.
Check one: Figrant access to my property (details	s below).
Printed Name / Middle initial / Surname	Signature
Date Land phone	Cell phone
Title if signing as authorized representative of owner	E-mail
Address	City / State / ZIP
Do you want to be present during sampling? Yes □	No Children using regularly
Property owner (if other than resident) Name	
Address	City / State ZIP
E-mail Land phone	Cell phone
Do you live at the property? Yes \square No \square	If no: Is anyone living on the property: Yes \Box No \Box
Name of person living on the property	Phone number(s)

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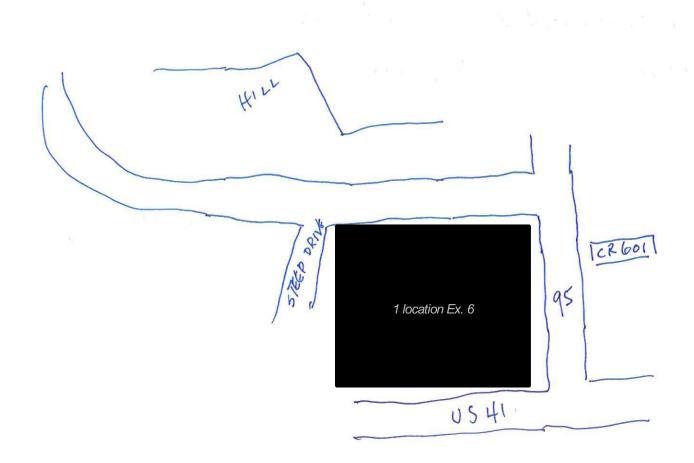
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Address CHAMPION	
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Check one: I grant access to my property (detail	Is below). \(\square \square \text{I do \$\mathcal{N}\Theta T grant access to my property.} \)
Printed Name / Middle initial / Surname	Signature
Date Land phone	Cell phone
	een phone
Title if signing as authorized representative of owner	E-mail
Address	City / State / ZIP
Do you want to be present during sampling? Yes	NO DICHILD FULL TIME
Property owner (if other than resident) Name	
Address	City / State ZIP
E-mail Land phone	Cell phone
Do you live at the property? Yes \square No \square	If no: Is anyone living on the property: Yes \square No \square
Name of person living on the property	Phone number(s)

2 names 1 address 1 phone no. 1 age Ex. 6

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I am the \square owner \square tenant \square auth at the following address [check one		entative of the owner of the property (hereafter "property") thority to sign this agreement:
Address CHAMPION		
City / State / ZIP		
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representatives to have access to the	he property to	ficers, employees, contractors and other designated conduct sampling and carry out other related response lowing: Collect well water samples.
sampling activities. Upon request e	enough water c PA's response	arch 2012 and continue until EPA and MDEQ complete can be collected to be shared by resident / owner of the well. authority under Section 104(a) of the Comprehensive ility Act, 42 U.S.C. Section 9604(a).
This written permission is given by me knowledge of my right to refuse and w	544	behalf of myself and all other co-owners of this property, with or promises of any kind.
Check one: If grant access to my printed Name / Middle initial / Surname	property (detail	ils below). ☐ I do NOT grant access to my property. Signature
2/16/12		Signature
Date	Land phone	Cell phone
Title if signing as authorized representative	e of owner	E-mail
Address		City / State / ZIP 2 Cl / Lace drinkers
Do you want to be present during s		City/State/ZIP 3 Children drinking No [Wafer -
Property owner (if other than resid		
Address		City / State ZIP
E-mail	_ Land phone	Cell phone
Do you live at the property? Yes ☐ I	No 🗆	If no: Is anyone living on the property: Yes \Box No \Box
Name of person living on the property		Phone number(s)

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Address	MPION	
City / State / ZIP	7 ()	
		tion Agency and Michigan Department of Environmental other designated representatives to enter the property.
representatives to have access	to the property to c	cers, employees, contractors and other designated conduct sampling and carry out other related response wing: Collect well water samples.
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This written permission is given by knowledge of my right to refuse a	66 003 67	ehalf of myself and all other co-owners of this property, with promises of any kind. ###################################
Check one: If grant access to	my property (details	s below). I do <i>NOT</i> grant access to my property.
Printed Name / Wildle Initial / Surna	me	Signature
Date	Land phone	Cell phone
Title if signing as authorized represen	tative of owner	E-mail
Address		City / State / ZIP
Do you want to be present dur	ing sampling? Yes ☐	No \ No Children Casing regular (y
Property owner (if other than	resident) Name	
Address_		City / State ZIP
E-mail	Land phone	Cell phone
Do you live at the property? Ye	s 🗌 No 🖺	If no: Is anyone living on the property: Yes \Box No \Box
Name of person living on the propert	у	Phone number(s)

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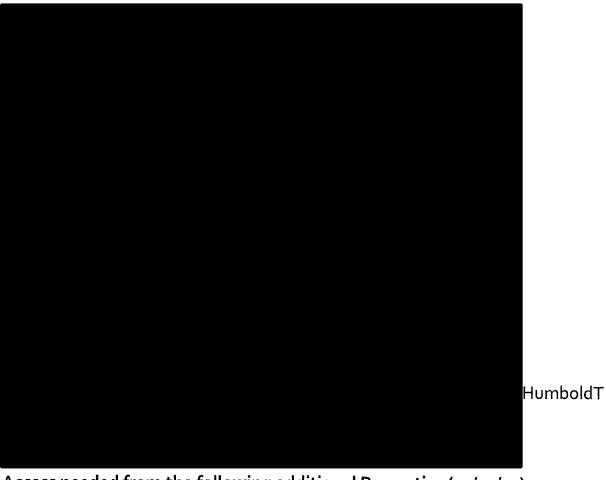
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City / State / ZIP	
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Check one: To grant access to my property (detail	Is helow)
Date Land phone	Cell phone
Lanu priorie	celi pilone
Title if signing as authorized representative of owner	E-mail
Address	City / State / ZIP 2 N/A Chulden
Do you want to be present during sampling? Yes	City/State/ZIP 3 5 P160T3 No Children No 1 1- Note Corner regularly 1- SW Corner using
Property owner (if other than resident) Name	
Address	
E-mail Land phone	Cell phone
Do you live at the property? Yes ☐ No ☐	If no: Is anyone living on the property: Yes \square No \square
Name of person living on the property	Phone number(s)

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PLACES WE NEED ACCESS



Access needed from the following additional Properties (10/20/11)

Humboldt Township Hall – Background soil and well water sample

– private well sample

private well sample

Drinking Water well located south of the Mill property

2 names 12 addresses Ex. 6